## HOMETOWN FREEDOM ACTION NETWORK

RECEIVED

2012 DEC -6 AM 10: 00 FEC MAIL CENTER

December 4, 2012

BY FEDERAL EXPRESS

Federal Election Commission 999 E Street, N.W. Washington, D.C. 20463

Re: Hometown Freedom Action Network

To Whom It May Concern:

I have enclosed the following on behalf of Hometown Freedom Action Network:

- 1. Amended Statement of Organization
- 2. October Quarterly Report
- 3. Post General Report

Thank you.

Sincerely,

David R. Langdon Assistant Treasurer

DRL/hmc enclosures

## 12030970584

FEC FORM 1

## STATEMENT OF ORGANIZATION

RECEIVED

FORM 1		ORGANIZATION			2012 DEC -6 AM 10: 00		
NAME OF COMMITTEE (in	full)	(Check if name is changed)		mple:If typing, type the lines.	12FE4M	FEU MAIL ULITER	
Hometown	Freedom	Action Net	twor	<b>k</b>			
		1 1 1 1 1 1		111111			
ADDRESS (number a	nd street) 891	3 Cincinna	ati-D	ayton Rd.			
(Check if an is changed)		st Chester	<u> </u>		OН	45069 _ 3131	
			CITY		STATE	ZIP CODE	
COMMITTEE'S E-MA	address	· · · · · · · · · · · · · · · · · · ·	_	dress) n@gmail.co	<b>m</b> , , ,		
COMMITTEE'S WEB	PAGE ADDRESS (	JRL)					
(Check if is change			1 1 1				
2. DATE 12 4 2012							
3. FEC IDENTIFIC	CATION NUMBER	C 0	0528	3901			
4. IS THIS STATE	MENT NEV	V (N) OR	×	AMENDED (A)			
I certify that I have examined this Statement and to the best of my knowledge and belief it is true, correct and complete.							
Type or Print Name	of Treasurer Da	vid R. Lar	ngdo	n, Assistant	Treasu	ırer	
Signature of Treasure	er Da	ICZ			Date 1	2 04 2012	
NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Statement to the penalties of 2 U.S.C. §437g.  ANY CHANGE IN INFORMATION SHOULD BE REPORTED WITHIN 10 DAYS.							
Office Use Only				For further information oc Federal Election Commissio Toll Free 800-424-9530 Local 202-694-1100		FEC FORM 1 (Revised 02/2009)	

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5. TYPE OF COMMITTEE						
Candidate Committee:						
(a) This committee is a principal campaign committee. (Complete the candidate infor	mation below.)					
(b) This committee is an authorized committee, and is NOT a principal campaign coinformation below.)	mmittee. (Complete the candidate					
Name of Candidate						
Candidate Office House Senate	State President District					
(c) This committee supports/opposes only one candidate, and is NOT an authorized	committee.					
Name of Candidate						
Party Committee:						
(d) This committee is a (National, State or subordinate) committee of the	(Democratic, Republican, etc.) Party.					
Political Action Committee (PAC):						
(e) This committee is a separate segregated fund. (Identify connected organization or	n line 6.) Its connected organization is a					
Corporation Corporation w/o Capital Stock	Labor Organization					
Membership Organization Trade Association	Cooperalive					
in addition, this committee is a Lobbyist/Registrant PAC.						
(f) This committee supports/opposes more than one Federal candidate, and is NOT committee. (i.e., nonconnected committee)	a separate segregated fund or party					
In addition, this committee is a Lobbyist/Registrant PAC.						
In addition, this committee is a Leadership PAC. (Identify sponsor ол line 6.)	)					
Joint Fundraising Representative:						
(g) This committee collects contributions, pays fundraising expenses and disburses net	proceeds for two or more political					
committees/organizations, at least one of which in an authorized committee of a federal						
(h) This committee collects contributions, pays fundraising expenses and disburses net committees/organizations, none of which is an authorized committee of a federal car						
Committees Participating in Joint Fundraiser						
1.                                 FEC ID numb	per C					
2. FEC ID numb						
3. FEC ID numb	per C					
4.                               FEC ID numb	per C					

W	/rite or Type Comm	nittee Name
H	<b>lometown</b>	Freedom Action Network
6.	Name of Any Co	onnected Organization, Affillated Committee, Joint Fundraising Representative, or Leadership PAC Sponsor
L		
L		
	Mailing Address	
		CITY STATE ZIP CODE
	Relationship:	Connected Organization Affiliated Committee Joint Fundraising Representative Leadership PAC Sponsor
7.	Custodian of Re books and record	cords: Identify by name, address (phone number optional) and position of the person in possession of committee is.
	Full Name	David R, Langdon
	Mailing Address	8913 Cincinnati-Dayton Rd.
		West Chester OH 45069 - 3131
	Title or Position	CITY STATE ZIP CODE
	Assistant	Treasurer [513] - [577] - [7394]
8.		ne name and address (phone number optional) of the treasurer of the committee; and the name and address of gent (e.g., assistant treasurer).
	Full Name of Treasurer	Kevin DeWine
	Mailing Address	8913 Cincinnati-Dayton Rd.
		West Chester OH 45069 - 3131
	Title or Position Treasurer	

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Full Name of Designated Agent David	R.,Langdon	1 1 1 1	
Mailing Address	8913 Cincinnati-Dayton Rd.	1 1 1 1 1	
	West Chester , , , , , , , , , , , , , , , , , , ,	<b>ГОН</b> Г	45069    - 3131
	CITY	STATE	ZIP CODE
Title or Position [Assistant Treasure	Telephone n	umber [51]	3, [577, [7394, _ ]
Banks or Other Depositor safety deposit boxes or ma	les: List all banks or other depositories in which the commintains funds.	nittee deposits	funds, holds accounts, rents
Name of Bank, Depository,			
PNC	Bank, , , , , , , , , , , , , , , , , , ,		
Mailing Address	8306 Cincinnati-Dayton Rd.		
	West Chester	ОН	[45069]   - [
	CITY	STATE	ZIP CODE
Name of Bank, Depository,	etc.		
•			
Mailing Address			
		1 1 1 1 1	
	CITY	STATE	ZIP CODE

(3/2005)

## **Federal Election Commission ENVELOPE REPLACEMENT PAGE FOR INCOMING DOCUMENTS** The FEC added this page to the end of this filing to indicate how it was received. Date of Receipt **Hand Delivered Postmarked USPS First Class Mail** Postmarked (R/C) **USPS** Registered/Certified **Postmarked USPS** Priority Mail Delivery Confirmation™ or Signature Confirmation™ Label Postmarked **USPS Express Mail** Postmark Illegible No Postmark **Shipping Date** Overnight Delivery Service (Specify): Feel Exp Next Business Day Delivery **Date of Receipt** Received from House Records & Registration Office **Date of Receipt** Received from Senate Public Records Office **Date of Receipt** Received from Electronic Filing Office Date of Receipt or Postmarked Other (Specify): 14/6/16